

Comment on: Patterns of acute surgical inflammatory processes presentation of in the COVID-19 outbreak (PIACO Study): surgery may be the best treatment option

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Throughout the COVID-19 pandemic, surgical departments have shifted towards non-operative management where safe. We read with interest the article by Guadalajara *et al.*¹, which recommends that we revert back to operative management in patients with acute inflammatory processes. We argue that these conclusions warrant further discussion, which we highlight below for further analysis.

The authors selected four prominent acute general surgical conditions; however, these encompass a broad range—from perianal abscess to perforated diverticulitis. Given the highly heterogeneous pathology and disease severity not clearly defined, it is hard to see how these patients can be compared.

Guadalajara and colleagues' assertion that COVID-19 status does not affect mortality is contradicted by larger international studies demonstrating that postoperative mortality is significantly worse for patients with COVID-19. On reviewing their presented data, this could represent a non-significantly increased mortality for COVID-19-positive patients (5.4 per cent *versus* 1 per cent in COVID-negative patients; $P=0.091$). With small sample sizes perhaps this would reach significance with larger populations, in keeping with other studies.

Guadalajara *et al.* recommend that practice revert back to operative over conservative management based on similar

complication rates between COVID-19-positive and -negative patients. However, no data on readmission rates or length of stay is provided. Alternatively one could conclude from these data that conservative management is safe.

The authors' recommendation does not account for the wider picture during a pandemic with second waves emerging during the recovery phase. A push towards more operative management may burden critical care departments and risk COVID-19 transmission. Current evidence suggests that conservative management is safe, and for appendicitis non-operative management is associated with a decreased length of stay. We therefore recommend that readers consider the wider evidence and relative low power of this study, and the uncertain impact of a COVID-19 resurgence, before changing their management strategies locally.

Reference

1. Guadalajara H, Muñoz de Nova JL, Fernandez Gonzalez S, Yiasemidou M, Recarte Rico M, Juez LD *et al.* Patterns of acute surgical inflammatory processes presentation of in the COVID-19 outbreak (PIACO Study): surgery may be the best treatment option. *Br J Surg* 2020; DOI: 10.1002/bjs.11950